

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of	)	<b>MAIL STOP RCE</b>
	)	
Masaya Hashimoto et al.	)	Group Art Unit: 2625
	)	
Application No.: 10/622,462	)	Examiner: Chad S. Dickerson
	)	
Filing Date: July 21, 2003	)	Confirmation No.: 5231
	)	
Title: DATA PROCESSING APPARATUS,	)	
DATA PROCESSING METHOD AND	)	
IMAGE FORMING APPARATUS	)	

**REQUEST FOR CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer Number **21839**

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 of the above-identified application.

1. ☐ a. Applicant(s) requests that any previously unentered after final amendments **not** be entered. Continued examination is requested based on the enclosed documents identified in item 1.c. below.
- ☒ b. Applicant(s) previously submitted the following document(s) for which continued examination is requested:
  - ☒ i. Consider the amendment previously filed on September 25, 2009.
  - ☐ ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_.
  - ☐ iii. Other: \_\_\_\_\_
- ☐ c. The following documents are enclosed with this submission:
 

<input type="checkbox"/> i. Amendment/Reply	<input checked="" type="checkbox"/> iv. Petition for Extension of Time
<input type="checkbox"/> ii. Affidavit(s)/Declaration(s)	<input type="checkbox"/> v. Other:
<input type="checkbox"/> iii. Information Disclosure Statement	
2. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed three months. **Fee under 37 CFR § 1.17(i) required.**)

3. ☒ **The RCE fee under 37 CFR § 1.17(e) is required by 37 CFR § 1.114 when the RCE is filed.** The fee is calculated below on the basis of the highest number of claims previously paid for in this application prior to this submission.

					FEES
RCE Fee (1801)					\$ 810
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	
Total Claims	0	20	0	x 52 (1202)	\$ 0
Independent Claims	0	3	0	x 220 (1201)	\$ 0
Total Fee					\$ 0
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					\$ - 0
TOTAL APPLICATION FEE DUE					\$ 810


4. ☐ Charge \_\_\_\_\_ to Deposit Account No. **02-4800** for the fee due.
5. ☒ Charge \$ 810 to credit card for the fee due. Form PTO-2038 is attached.
6. ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800.

Respectfully submitted,

BUCHANAN INGERSOLL & ROONEY PC

Date: October 26, 2009

By:

  
 Bruce D. Gray  
 Registration No. 35799

**Customer No. 21839**  
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